UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No.	03500.017569
First Name	ed Inventor or Application Identifier
MASANORI OGURA, ET A	L
Express Mail Label No.	

PATENT APPLICATION			First Named Inventor or Application Identifier					
TDANCMITTAL			MASANORIO	MASANORI OGURA, ET AL.				
(Uniy for new nonprovisional applications under 37 CFR 1.53(b))			Express Mail	Label No.				
APPLICATION ELEMENTS MPEP chapter 600 concerning utility patent application contents.			ADDR	ESS TO:	Mail Stop F Commission P.O. Box 1 Alexandria	oner for Pa 450	tents	
1. X Fee Transmit (Submit an original)	tal Form ginal, and a duplicate for fee p	rocessing)	7.	CD-ROM or Program (Ap	CD-R in duplicate,			er
2. Applicant clai See 37 CFR	ms small entity status. 1.27.		8.		nd/or Amino Acid S all necessary)	Sequence S	Submission,	10
3. X Specification	Total Pa	ges 33		a C	omputer Readable	Form (CR	F)	/664919
4. X Drawing(s) (3	35 USC 113) Total Sh	eets 9		<u></u>	tion Sequence Listi CD-ROM or CD-R (or	97 U. 0/66
5. X Oath or Deck	or Declaration Total Pages 2				paper	//		22
a. X Ne	a. X Newly executed (original or copy)			_=_	tatements verifying PANYING APPLIC			s
b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)				Assignment F	apers (cover sheet &	& document	t(s))	
i.[DELETION OF INV	or(s) 10.	(When there is an assignee)					
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).				11. English Translation Document (if applicable) Information Disclosure Copies of IDS				
6. X Application Data Sheet. See 37 CFR 1.76					DS)/PTO-1449	X	Copies of IE Citations	J G
			14. X	Return Rece	ipt Postcard (MPE			
			15.	15. Certified Copy of Priority Document(s) (If foreign priority is claimed)				
			16.	16. Other:				
17. If a CONTINUING	APPLICATION, check app	ropriate box and sup	ply the requisite i	nformation:				
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: Continuation Divisional Continuation-in-part (CIP) Of prior application information: Examiner Examiner Group/Art Unit:								
For CONTINUATION OR considered a part of the d	DIVISIONAL APPS only: The isclosure of the accompanyin n has been inadvertently omit	g continuation or divisi	onal application an	from which an o	ath or declaration is	supplied ur	•	
		18. CORRES	SPONDENCE ADD	DRESS				
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below								
NAME								
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Address								
City		State			Zip Code			
Country	†	Telephone			Fax	1		

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	8-20 =	0	X \$ 18.00 =	\$0.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	1-3 =	0	X \$ 84.00 =	\$0.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			\$280.00 =	\$0.00
				BASIC FEE (37 CFR 1.16(a))	
			Total of	above Calculations =	\$750.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
		\$750.00			
a.		ntity statement is enclose		nal application and su	ch status is still prope
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	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED
NAME	Christopher Philip Wrist - Reg. No. 32,078
SIGNATURE	Variable
DATE	September 22, 2003

CPW/kkv

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